

# *Instructions on Filing a Complaint*

Please complete the Mortgage Fraud Complaint Form in its entirety. Attach two copies of any documents that support your complaint. This includes contracts, receipts, etc. Please see the Mortgage Document Checklist for other suggested documents to submit.

Once you have completed the form and gathered document copies, you may either mail or fax the information to:

South Carolina Department of Consumer Affairs  
P.O. Box 5757  
Columbia, South Carolina 29250

Fax No.: 803-734-4207

*South Carolina*  
DEPARTMENT OF CONSUMER AFFAIRS

When the complaint is received it will be given a number and assigned to a complaint analyst. The analysts and staff will evaluate your complaint to determine if the Department can assist you and will be in contact with you throughout the process. If your complaint falls within the jurisdiction of another agency, we are required to forward your complaint to that agency. If you are represented by an attorney or if legal action has been taken, the Department cannot interfere. The Department cannot take business to business complaints or complaints between two individuals.

If you have any questions about filing a complaint or the complaint process, please call the Department at:

Main Telephone No.: 803-734-4200

or

1-800-922-1594 Toll free in S.C.

# *800-922-1594*



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For Office Use Only

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# Mortgage Fraud Complaint Form

Please answer the following questions to the best of your knowledge. Once you have completed this form mail to: SCDCA, c/o Mortgage Fraud Complaint, P.O. Box 5757, Columbia, SC 29250-5757

Your Information		Business Complaint Against	
Last Name _____ First Name _____		Name of Company _____	
Address _____		Name of person you dealt with _____	
City _____	State _____ Zip Code _____	Address _____	
Phone _____	E-mail _____	City _____	State _____ Zip Code _____
Age (optional) _____		Phone _____	

## Questions:

1. Have you filed a complaint with any other consumer agency services? Yes \_\_\_\_\_ No \_\_\_\_\_

2. Is an attorney handling your complaint? Yes \_\_\_\_\_ No \_\_\_\_\_

If you answered YES to any of the above questions, please provide their name, address, and telephone number.

3. Is your mortgage:

☐ Current ☐ 30 days behind or less ☐ 31 to 90 days behind

☐ 91 or more days behind ☐ Home is in foreclosure

4. Have you contacted the company? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, when? \_\_\_\_\_

Please provide a complete explanation of your complaint: (Attach additional pages as needed.)

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What do you want the business to do?

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Your Signature \_\_\_\_\_ Date \_\_\_\_\_

**REMEMBER:** Attach two copies of any items that support your complaint.